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Dated: 3/9/06

Signature:

Tina M. Dougal
(Tina M. Dougal)

Docket No.: 0108195.139US1
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
BRAIN, Archibald I. J.

Application No.: 10/659455

Confirmation Number: 4910

Filed: September 10, 2003

Art Unit: 3761

For: INTUBATING LARYNGEAL MASK
AIRWAY DEVICE WITH FIBER OPTIC
ASSEMBLY

Examiner: M. B. Patel

MS Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUBMISSION OF REPLACEMENT SHEETS

Dear Sir:

Applicant submits herewith 5 sheets of replacement drawings together with the payment of the issue fee.

The replacement drawings are being provided as a matter of convenience, as it is not clear from the Notice of Allowability that replacement drawings are required. No fees are believed to be due.

Dated:

MARCH 8, 2006

Respectfully submitted,

By *[Signature]*

Richard A. Goldenberg

Registration No.: 38,895

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/659455-Conf. #4910
	Filing Date	September 10, 2003
	First Named Inventor	Archibald I. J. BRAIN
	Art Unit	3743
	Examiner Name	M. B. Patel
Total Number of Pages in This Submission	Attorney Docket Number	0108195.00139US1

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s)/Submission of Replacement Sheets <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTOL-85 (original and copy) Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	WILMER CUTLER PICKERING HALE AND DORR LLP		
Signature			
Printed name	Richard A. Goldenberg		
Date	MARCH 8, 2006	Reg. No.	38,895

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